Referral

* Referral Date
* Referred by
* Referred from
* Referral ID (PK)
* NHI (FK)

Surgeon

* Surgeon ID (PK)
* Department ID (FK)
* Firstname
* Lastname

Department

* DepartmentName
* Department ID (PK)

Patient

* NHI (PK)
* Firstname
* Lastname
* DOB
* Gender
* HealthTargetEligable

Appointment

* Appointment ID (PK)
* FSA Date
* Surgeon ID (FK)
* NHI (PK)